							_				
Fill	in this information t	to identify your ca	ase:								
Del	otor 1	Cruz Ariel L	eal, Jr.								
	otor 2 ouse, if filing)					_					
Uni	ted States Bankrup	otcy Court for the	: WESTERN DISTRIC	T OF MICHIGAN							
Cas	se number 17	-00982					Chec	ck if this is	:		
(If kr	nown)			-				An amende	ed filing		
_										g postpetition ollowing date:	
O.	fficial Form	1061					N	/M / DD/ Y	YYYY		
S	chedule I:	Your Inc	ome								12/15
	t 1: Describ	et to this form.	r spouse is not filing w On the top of any additi								
1.	Fill in your empl information.	loyment		Debtor 1				Debtor 2	2 or non-fi	ling spouse	
	If you have more t attach a separate information about employers.		Employment status	■ Employed				☐ Employed			
		it additional		☐ Not employed				☐ Not employed			
	Include part-time,	account or	Occupation	<b>Puchasing Cod</b>	ordinato	r					
	self-employed wo		Employer's name	Ritsema Assoc	iates						
	Occupation may or homemaker, if		Employer's address	3000 Dormax S Grandville, MI							
			How long employed t	here? 1 mo				_			
Par	t 2: Give De	etails About Mor	nthly Income								
	mate monthly incouse unless you are		ate you file this form. If	you have nothing to	report for	any	line, write	e \$0 in the	space. Inc	lude your noi	n-filing
	u or your non-filing e space, attach a s		ore than one employer, co this form.	ombine the information	on for all	empl	oyers for	that perso	on on the lir	nes below. If y	you need
							For De	btor 1		otor 2 or ng spouse	
2.			ry, and commissions (b calculate what the month		2.	\$	3	,466.67	\$	N/A	
3.	Estimate and lis	t monthly overt	ime pay.		3.	+\$		156.00	+\$	N/A	
4.	Calculate gross	Income. Add lin	ne 2 + line 3.		4.	\$	3,6	22.67	\$	N/A	

Debt	or 1	Cruz Ariel Leal,	Jr.	_	Ca	ase number (if known)	17-00982		
					ı	For Debtor 1	For Debtor	r 2 or	
						or Bostor 1	non-filing		
	Copy	y line 4 here		4.	-5	3,622.67	\$	N/A	
5.	Liet	all navrall daducti	long						
J.		all payroll deducti		Eo	,	704.00	¢.	NI/A	
	5a. 5b.		and Social Security deductions ributions for retirement plans	5a. 5b.			\$ \$	N/A	
	5с.	•	butions for retirement plans	5c.			\$	N/A N/A	-
	5d.	-	nents of retirement fund loans	5d.	,		\$	N/A	
	5e.	Insurance	nonto or romonone rana roano	5e.			\$	N/A	
	5f.	Domestic suppo	ort obligations	5f.	5		\$	N/A	-
	5g.	Union dues		5g.	5		\$	N/A	•
	5h.	Other deduction	s. Specify:	5h.·	+ 5	0.00	+ \$	N/A	
6.	Add	the payroll deduc	tions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	761.93	\$	N/A	
7.	Calc	ulate total monthly	y take-home pay. Subtract line 6 from line 4.	7.	\$	2,860.74	\$	N/A	
8.			egularly received:						
	8a.	Net income from profession, or fa	n rental property and from operating a business,						
			nt for each property and business showing gross						
		receipts, ordinary	and necessary business expenses, and the total						
		monthly net incon		8a.	,	1,000.00	\$	N/A	
	8b.	Interest and divi		8b.	5	0.00	\$	N/A	-
	8c.	regularly receive	payments that you, a non-filing spouse, or a dependent	i					
		Include alimony, s	spousal support, child support, maintenance, divorce						
		•	roperty settlement.	8c.	9		\$	N/A	
	8d.	Unemployment of	compensation	8d.			\$	N/A	
	8e.	Social Security		8e.	9	0.00	\$	N/A	-
	8f.		ent assistance that you regularly receive istance and the value (if known) of any non-cash assistance	2					
			such as food stamps (benefits under the Supplemental						
			nce Program) or housing subsidies.						
	_	Specify:		8f.	5		\$	N/A	
	8g.	Pension or retire		8g.			\$	N/A	
	8h.	Other monthly in	ncome. Specify:	8h	+ {	0.00	+ \$	N/A	
9.	Add	all other income.	Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,900.00	\$	N/A	
			· ·		<u>L</u>				<u> </u>
10.	Calc	ulate monthly inco	ome. Add line 7 + line 9.	10. \$	6	4,760.74 + \$	N/A	= \$	4,760.74
		-	0 for Debtor 1 and Debtor 2 or non-filing spouse.	'		<u> </u>		11'-	1,1 0011 1
11.	State	e all other regular	contributions to the expenses that you list in Schedule	J.					
			om an unmarried partner, members of your household, you		ndei	nts, your roommates	s, and		
		r friends or relatives							
	Spec		ounts already included in lines 2-10 or amounts that are not	avallal	bie	to pay expenses list		e J. +\$	0.00
	Opce							Ψ	0.00
12.	Add	the amount in the	last column of line 10 to the amount in line 11. The re-	sult is t	he o	combined monthly in	ncome.		
			e Summary of Schedules and Statistical Summary of Certa	in Liab	ilitie	es and Related <i>Data</i>	), if it 12.	•	4.760.74
	appli	es					12.	Ψ	<del>4</del> ,100.14
								Combin	
13	Do v	ou expect an incr	ease or decrease within the year after you file this form	12				monthly	y income
10.	y	No.	case of decrease within the year after you me this form	••					
	_	Yes. Explain:							
					_				

Fill	in this information to identify your case:								
Deb	otor 1 Cruz Ariel Leal, Jr.		Che	ck if this is:					
	oral Artor Loan, or.			An amended filing					
	otor 2				ving postpetition chapter				
(Spo	ouse, if filing)		13 expenses as of the following date:						
Unit	ted States Bankruptcy Court for the: WESTERN DISTRICT OF MICHIGAN		MM / DD / YYYY						
	se number 17-00982 (nown)								
0	fficial Form 106J								
S	chedule J: Your Expenses				12/15				
Be info	as complete and accurate as possible. If two married people are filing to ormation. If more space is needed, attach another sheet to this form. On mber (if known). Answer every question.								
	rt 1: Describe Your Household								
1.	Is this a joint case?  ■ No. Go to line 2.  □ Yes. Does Debtor 2 live in a separate household?  □ No □ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate	rate Housel	<i>hold</i> of Del	otor 2.					
2.	Do you have dependents? ■ No								
	Do not list Debtor 1 and ☐ Yes. Fill out this information for Depend	dent's relation		Dependent's age	Does dependent live with you?				
	Do not state the dependents names.				□ No □ Yes □ No □ Yes □ No □ Yes □ No □ Yes □ No				
3.	Do your expenses include expenses of people other than yourself and your dependents?				☐ Yes				
Est exp app	t2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless you are us benses as of a date after the bankruptcy is filed. If this is a supplemental plicable date. Elude expenses paid for with non-cash government assistance if you kno be value of such assistance and have included it on Schedule I: Your Income	Schedule ow		he box at the top o	f the form and fill in the				
(Of	fficial Form 106l.)			Your expe	enses				
4.	The rental or home ownership expenses for your residence. Include first payments and any rent for the ground or lot.	st mortgage	4.	\$	1,250.00				
	If not included in line 4:								
	4a. Real estate taxes		4a.	\$	0.00				
	4b. Property, homeowner's, or renter's insurance		4b.	·	0.00				
	4c. Home maintenance, repair, and upkeep expenses		4c.	\$	50.00				
	4d. Homeowner's association or condominium dues			\$	42.00				
5.	Additional mortgage payments for your residence, such as home equity	/ loans	5.	\$	0.00				

ebtor 1	Cruz Ariel Leal, Jr.	Case num	per (if known)	17-00982
Util	lities:			
6a.	Electricity, heat, natural gas	6a.	\$	198.00
6b.	Water, sewer, garbage collection	6b.	\$	60.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	235.00
6d.	Other. Specify:	6d.	\$	0.00
Foo	od and housekeeping supplies	7.	\$	330.00
	ildcare and children's education costs	8.	\$	0.00
Clo	thing, laundry, and dry cleaning	9.	\$	25.00
	rsonal care products and services	10.	\$	25.00
	dical and dental expenses	11.	\$	75.00
	nsportation. Include gas, maintenance, bus or train fare.			
	not include car payments.	12.	\$	300.00
<ol><li>Ent</li></ol>	tertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	25.00
I. Cha	aritable contributions and religious donations	14.	\$	0.00
	urance.			
	not include insurance deducted from your pay or included in lines 4 or 20.			
	a. Life insurance	15a.		0.00
	b. Health insurance	15b.		0.00
	c. Vehicle insurance	15c.	·	200.00
	Other insurance. Specify:	15d.	\$	0.00
	<b>ces.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.			
•	ecify:	16.	\$	0.00
	tallment or lease payments:	47.	Φ.	
	a. Car payments for Vehicle 1	17a.	·	0.00
	o. Car payments for Vehicle 2	17b.	·	0.00
	c. Other. Specify:	17c.		0.00
	I. Other. Specify:	17d.	\$	0.00
	ur payments of alimony, maintenance, and support that you did not report a		\$	0.00
	ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I) ner payments you make to support others who do not live with you.		\$	0.00
	ecify:	19.	Ψ	0.00
	ner real property expenses not included in lines 4 or 5 of this form or on <i>Sch</i>		ur Income	
	a. Mortgages on other property	20a.		1,050.00
	o. Real estate taxes	20b.		0.00
	c. Property, homeowner's, or renter's insurance	20c.	·	0.00
	I. Maintenance, repair, and upkeep expenses	20d.		50.00
	e. Homeowner's association or condominium dues	20e.		0.00
	ner: Specify:	21.	·	0.00
. Ош			- Ψ	0.00
	culate your monthly expenses			
	a. Add lines 4 through 21.		\$	3,915.00
22b	o. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c	c. Add line 22a and 22b. The result is your monthly expenses.		\$	3,915.00
	culate your monthly net income.	20	Φ.	
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	·. ———	4,760.74
23b	c. Copy your monthly expenses from line 22c above.	23b.	-\$	3,915.00
22-	Subtract your monthly expenses from your monthly income			
230	<ul> <li>Subtract your monthly expenses from your monthly income.</li> <li>The result is your monthly net income.</li> </ul>	23c.	\$	845.74
	The result is your monthly net income.	200.	<u> </u>	
4. <b>Do</b>	you expect an increase or decrease in your expenses within the year after y	ou file this	form?	
For	example, do you expect to finish paying for your car loan within the year or do you expect you			ease or decrease because o
	dification to the terms of your mortgage?			
	No			
	Yes. Explain here:			